



SUMMER FOOD SERVICE

Providing **free** meals for Arizona **kids**.

Arizona Department of Education

TEL 602.542.8700

TOLL FREE 800.352.4558

FAX 602.542.3818 or 602.542.1531

Field Trip Notification Form

SPONSOR NAME	CTD
SPONSOR CONTACT	
PHONE NUMBER + EXT.	EMAIL
SITE AFFECTED BY FIELD TRIP	FIELD TRIP DATE
FIELD TRIP LOCATION	# OF CHILDREN ATTENDING FIELD TRIP

Meals/Times Affected By Field Trip

- ☐ Breakfast _____ to _____
- ☐ AM Snack _____ to _____
- ☐ Lunch _____ to _____
- ☐ PM Snack _____ to _____
- ☐ Supper _____ to _____

Field Trip Menu (Include Portion Sizes)

Do you plan on claiming meals served off site during the field trip?

☐ Yes ☐ No

If "YES," please include the menu (with portion sizes) served off site during the field trip in the section above.

Open sites are required to remain open and operational to serve the community despite a large number of children being off site on a field trip. Do you certify that compliance with this regulation is upheld?

☐ Yes ☐ No

**Complete electronic signature for Sponsor Representative LAST. Once Sponsor Representative Signature is completed, all fields on the form will be locked. To create a new electronic signature, click on the signature field. When the dialogue box opens, change "Sign As:" to "New ID" and complete the steps to create an electronic signature for the signing party. After signing, click "Submit to ADE" below.*

Sponsor Representative Signature _____ Date _____

Save a copy of this completed form for you records.

Submit to ADE

ADE OFFICIAL USE ONLY - DO NOT TYPE IN THIS SECTION

Date Notification Received _____

ADE Specialist Signature Upon Approval _____ Date Approved _____